

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 08/26/2009
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 291309	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 02/26/2009
NAME OF PROVIDER OR SUPPLIER BOULDER CITY HOSPITAL, INC			STREET ADDRESS, CITY, STATE, ZIP CODE 901 ADAMS BLVD BOULDER CITY, NV 89005		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
C 000	<p>INITIAL COMMENTS</p> <p>The Statement of Deficiencies was generated as a result of a complaint investigation survey conducted at the facility on February 24-26, 2009.</p> <p>The following complaints were investigated: Complaint # NV 00017248 Unsubstantiated Complaint #NV 00017664 Unsubstantiated Complaint #NV 00017905 Unsubstantiated (deficiencies identified during investigation) Complaint #NV 00018472 Substantiated Complaint #NV 00019139 Unsubstantiated</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims s relief that may be available to any party under applicable federal, state or local laws</p>	C 000			
C 225	<p>485.623(b)(4) MAINTENANCE</p> <p>[The CAH has housekeeping and preventive maintenance programs to ensure that-</p> <p>(4) the premises are clean and orderly;</p> <p>This STANDARD is not met as evidenced by: Based on observation and interview, the facility failed to store extra emergency room beds in proper storage areas thus limiting the hallway corridor space.</p> <p>Findings include:</p> <p>During a tour of the facility on 2/24/09, it was noted that there were two hospital beds set up in the hallway by the emergency room. There were also small privacy room dividers between the</p>	C 225			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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C 225	Continued From page 1 beds. This narrowed the hallway approximately to 4 feet wide. The Director of Nursing was asked why these beds were in the hallway. She stated they were set up in the hallway on a permanent basis to allow for extra emergency room beds for patient overflow. The beds remained in the hallway throughout the survey.	C 225			
C 297	485.635(d)(3) NURSING SERVICES All drugs, biologicals, and intravenous medications must be administered by or under the supervision of a registered nurse, a doctor of medicine or osteopathy, or where permitted by State law, a physician assistant, in accordance with written and signed orders, accepted standards of practice, and Federal and State laws. This STANDARD is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure that all medications were ordered by a physician or other professionals in accordance with state law before administration to the patient for 1 out of 12 patients. (Patient #11). Findings include: Observation was made of a scheduled colonoscopy on 2/25/09. Patient #11 was admitted to the Endoscopy Room as an outpatient. The patient had an intravenous needle inserted in the left arm at 8:35 AM. The nurse stated that she gives Demerol 50 milligram and Versed 2 milligrams intravenously when the physician "walks in the door". The patient was asked questions regarding allergies and latex allergies by the nurse. The nurse did not have a	C 297			

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C 297	<p>Continued From page 2</p> <p>current history nor list of current medications that the patient takes on a routine basis from the primary physician. The primary physician was also the physician who was scheduled to perform the procedure. The nurse administered to the patient Levsin tablets for a total dose of 0.5 milligram. Patient #11 file lacked documentation of any of these orders. There was no documentation of verbal orders given for this specific patient for insertion of the intravenous needle or for administration of the medication.</p> <p>Patient #11's physician walked into the room at approximately 8:45 AM. The nurse administered the Demerol and Versed medication intravenously to the patient. The procedure start time was 8:52AM and finish time was 9:05AM. It was observed that the physician filled out a very abbreviated history and physical. He then signed the orders for the patient.</p> <p>Interview with the nurse who was responsible for the endoscopy room and the procedure was conducted after the procedure. The nurse was asked if there were any orders written prior to Patient #11's procedure that was not available during the observation period. She stated no. The nurse was asked if there were any written protocols that had been approve by the primary physician with an order from the physician to implement these based on the physician's assessment of the patient. The nurse said no. The nurse stated "he told me to do this for all his patients". The nurse stated she thought if she wrote these orders on the record and then the physician signed them it was similar to a verbal order.</p> <p>Interview was held with the Director of Nurses</p>	C 297			

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C 297	Continued From page 3 regarding the observed process for the lack of physician orders for the Levsin and the Intravenous medications. She stated she was unaware that the process being done in the manner it was implemented. Procedure protocols, including orders for intravenous access and medications for the outpatients receiving endoscopic procedures patients, for this physician needed to be developed and approved. The physician would need to order the protocol for the individual patient based on his assessment of the patient prior to the procedure.	C 297			
C 305	485.638(a)(4)(ii) RECORDS SYSTEMS [For each patient receiving health care services, the CAH maintains a record that includes, as applicable-] (ii) reports of physical examinations, diagnostic and laboratory test results, including clinical laboratory services, and consultative findings; This STANDARD is not met as evidenced by: Based on observation and interview, the facility failed to ensure that a medical history and physical was obtained for patients receiving an endoscopic procedure prior to the procedure. (Patient #11). Findings include: Observation was made of a scheduled colonoscopy on 2/25/09. Patient #11 was admitted to the Endoscopy Room as an outpatient. The patient had an intravenous needle inserted in the left arm at 8:35 AM. The	C 305			

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C 305	<p>Continued From page 4</p> <p>nurse stated that she gives Demerol 50 milligram and Versed 2 milligrams intravenously when the physician "walks in the door". The patient was asked questions regarding allergies and latex allergies by the nurse. The nurse did not have a current history nor list of current medications that the patient takes on a routine basis from the primary physician. The primary physician was also the physician who was scheduled to perform the procedure.</p> <p>Patient #11's physician walked into the room at approximately 8:45 AM. The procedure start time was 8:52AM and finish time was 9:05AM. It was observed that the physician filled out a very abbreviated history and physical at the end of the procedure. There was no admission note that included at a minimum critical information about the patient's condition including pulmonary status, cardiovascular status and allergies prior to the start of the procedure nor a dictated history and physical.</p> <p>Interview with the nurse revealed that she did not have a prior admission note with a brief summary of respiratory status, cardiovascular status, allergies, current mediations and any other information that may be necessary to perform an out patient endoscopy procedure.</p>	C 305			